

POULTRY FEE - \$3 PER BIRD Number of birds____ Total Enclosed: \$_____

NC STAT	E FAIR E	NTRY FORM
OPEN SHOW _	YOUTH SHOW	Registration Deadline - Sept. 15
Exhibitor's Legal Name:		
First Name, Middle Initial, Last Name - a	as it appears on your social security card, d	driver's license or any government document
Exhibitor's Legal Address:		
Street Address - R.F.D., PO Box or Apar	rtment Number)	
City, State, Zip		
County	E-mail address	
		Poultry Cages Need
Phone	[′] В	Birth Date Bantams
Exhibitor Social Security No	umber:	Standard
		Turkey
		Guinea

- Exhibitors are allowed to register for competitions without disclosing their Social Security Number.
- Choosing NOT to disclose their SSN at the time of registration forfeits any and all prize money.
- Prizes such as ribbons, medals, rosettes and plaques will still be awarded.
- · State Fair staff WILL NOT contact winning exhibitors following the fair who did not submit their SSN at the time of registration.
- State Fair staff WILL NOT accept any calls/emails/etc. from winning exhibitors who chose not to disclose their SSN.

IMPORTANT IRS INFORMATION: Internal Revenue Service (IRS) regulations require that we have the Social Security Number (SSN) or Taxpayer Identification Number (TIN) which corresponds to the name to whom the check for prize money is written. If we are notified by the IRS that the SSN or TIN does not match the name of record, we will have to backup withholding taxes and you may be subject to a \$50 penalty by the IRS. A separate form should be used for each SSN/TIN. You must provide this information to be eligible for prize money. Also IRS regulations state that any prize money totaling \$600 or more in a calendar year must be reported on a Form 1099.

Exhibitor Signature:			

By signing this form you are agreeing to the terms and conditions concerning social security numbers and all state fair rules and regulations.

MAIL FORM TO: NC State Fair Entry Office 1010 Mail Service Center Raleigh NC 27699-1010

Exhibitor N	lame:		
Paper Entr	y forms are limited to 20 entries. Onli	ne entry at:	www.ncstatefair.org or http://ncsfge.fairwire.com
Division Number	Division Description First three words as found in premium book	Class Number	Class Description First three words as found in premium book

MAIL FORM TO: NC State Fair Entry Office 1010 Mail Service Center Raleigh NC 27699-1010

GENERAL FAIR RULES FOR EXHIBITORS

- Exhibitors are encouraged to make all entries early. The right is reserved to reject any entry.
- In most divisions, competition is limited to residents of North Carolina.
- All entries must be made in the name of the owner, breeder, manufacturer, grower, producer or one whose skill the exhibit represents. A firm, to be entitled to exhibit as such, must have been organized not less than 30 days prior to the closing date for entries and such firm must have been organized as a bona fide firm for the purpose of producing or buying and selling the articles or animals it proposes to exhibit in the name of such firm. A firm will be regarded as one exhibitor.
- Official printed forms or copies of forms must be used in making applications for entry. Be sure to fill out the application form completely, accurately and legibly.
- No article or animals will be entitled to exhibition space until proper entry has been made.
- Entry fees are required in some departments.
- Unclaimed exhibits from competitive departments will be considered abandoned if not called for within
 one week after the official closing of the Fair and may be disposed of as the Manager of the Fair sees fit.
- All exhibits must be officially entered in the Fair on official entry forms provided for that purpose, before
 the closing date for entries in the department. No article or animal will be entitled to space or considered
 in the judging until proper entry has been made. Removal of exhibits before the date and time specified
 will be cause for forfeit of all premiums won, all fees paid and the right to further participation in the Fair.
- All exhibits will be numbered and recorded in the books of the proper department and class and exhibit tag with corresponding numbers will be issued. This tag must be securely attached to the exhibit and must remain on the exhibit throughout the Fair.
- The State Fair assumes no responsibility for the incorrect tagging of exhibits.
- Entries may be shipped via UPS or Fed Ex (signature required) to:
 NC State Fair Attn Entry Department 4285 Trinity Road Raleigh NC 27607
- The management will not be responsible for delayed shipments which arrive at the Fair too late to be considered in the judging. All reasonable care will be given to all exhibits; however, exhibits are entered at the exhibitor's risk. The Fair and staff are not responsible for damage or loss at any time.
- Division Directors and Department Superintendents will have full authority over allocation of space.
- If the claim check is lost, such loss should be reported promptly and it will be necessary for the exhibitor to furnish the Department Superintendent or Competitive Exhibits Coordinator proof of ownership of the article on exhibit.
- The Fair management reserves the right to reject any exhibit which does not reflect merit and which would not be a credit to both the exhibitor and the Fair.
- Division Directors, Department Superintendents, and/or Judges must report disqualification of entries to the Manager of the State Fair immediately after such action is taken. Under no circumstances will judging be considered official and premiums paid in a class where disqualification is recommended until approval of the disqualification(s) is obtained from the fair manager.

- Decision of the judges will be final and no appeal will be considered except in cases of protest in writing, with strong evidence of fraud or violation of the rules of the Fair. Protests must be in writing and filed with the Competitions Coordinator.
- Entries made in wrong classes risk not being judged, and may be moved to the proper class by the Department Supervisor or Competitive Exhibits Coordinator with the permission of the exhibitor.
- Judges will not award premiums or ribbons to any article or animal that does not qualify for one of the classes in the State Fair Premium List.
- The NC State Fair is under no obligation to display every item entered.
- Photographs of exhibits and winners will be taken by official photographers of the NC State Fair.
 Exhibitors hereby grant the NC State Fair permission to utilize photographs, images, or likenesses in whole or in part for use in official NC State Fair publications and promotions.
- The following colors of ribbons will be used to designate awards:

The following colors of hisboris	will be asea
Grand Champion	. Purple
Reserve Champion	Lavender
First Place	Blue
Second Place	Red
Third Place	White
Fourth Place	. Pink
Fifth Place	Yellow
Sixth Place	Dark Green
Seventh Place	Light Green
Eighth Place	Tan
Ninth Place	.Gray
Tenth Place and above	Light Blue

NC Substitute W-9 forms are required. You won't get paid if the form is incomplete.

If you make a mistake, start over on a new form.

If you don't want prize money, write "DECLINE" across the form and turn it in.

GUIDE TO FILLING OUT A NC SUBSTITUTE W-9 FORM

*** All sections marked with a red asterisk are required ***

CONTESTANTS FILLING OUT THE FORM FOR THEMSELVES:

- *1. Check the TOP BOX for Social Security Number (SSN)
- *2. Write your social security number in the blank space
- *4. Write your full legal name the same way it appears on your social security card
- *Address line 1: Write your street number and street name
- *City Write your city *State Write in your state *Zip Code Write in your zip code
- *County Write your COUNTY like "Wake", NOT your country like USA.
- *8. Contact Name Write your name or your parents name
- *9. Phone Number Write your phone number
- *11. Email Address Write an email address where you can be reached
- *12. Entity Type Check the first box for "Individual"
- *13. Entity Classification Check "Other" at the bottom of the list write "Contest Winner" in the blank space below it.
- *Printed Name Print your name
- *Printed Title Write "Individual"
- *Authorized US Signature Sign your name
- *Date Write the date you fill out the form

PARENTS FILLING OUT THE FORM FOR A MINOR CHILD:

Fill out the form with your child's information, including social security number. You can sign the form at the bottom if your child is too young to sign it themselves.

BUSINESS', GROUPS OR FARMS FILLING OUT THE FORM:

Fill out the form with your business information, including your tax ID number. Fill out the form with the exact information as it appears on your tax documents. Fillable form must be saved to your computer, named with your name, uploaded in ShoWorks when you register. You can also print this form, fill it out and mail it with your paper entry form.

NC Office of the State Controller (IRS Form W-9 will not be accepted in lieu of this form) *Denotes a Required Field

STATE OF NORTH CAROLINA SUBSTITUTE W-9 FORM Request for Taxpayer Identification Number



	Empl	I Security Number (SSN), OR oyer Identification Number (EIN), OR dual Taxpayer Identification Number (ITIN)	or ITIN) type a Identification provide this in payment to yo	nd enter your 9-digit I Number is being reque formation in a timely r u or require The State	yer Identification Number (EIN, SSN, D number. The U.S. Taxpayer ested per U.S. Tax Law. Failure to manner could prevent or delay of NC to withhold 24% for backup	
	*4. Legal Name (as registered with the IRS - see instructions): 5. Business Name/DBA/Disregarded Entity Name, if different from Legal Name:		3. Unique Entity Identifier or Dunn & Bradstreet Universal Numbering System (DUNS) (see instructions):			
		Con	tact Information			
u	*6. Legal Address	Con		Iress (Location specific	cally used for payment that is	
atic	6. Legal Address			egal Address, if applic		
fic	*Address Line 1:		Address Line 1:	, 11	,	
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ayeı	*City	*State *Zip (9 digit)	digit) City State Zip (9 digit)			
Taxpayer Identification	*County		County			
- 1	*8. Contact Name:					
n 1	*9. Phone Number:					
Section	10. Fax Number:					
Sec	*11. Email Address:					
		*12. Entity Type		*13. Entity Classification	14. Exemptions (see instructions)	
	Partnership Limited liability of	Trust/Estate Other company. Enter the tax classification (C=C corporation) P=Partnership)		Medical Services NC Local Go	vices ney Exempt payee code (if any): vt	
Note: Check the appropriate box in the line above for the tax classification of the singlemember owner. Do not check LLC if the LLC is classified as a single-member LLC that is			ency Exemption from FATCA reporting code (if any):			
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